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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/832,304	04/10/2001	Michele DuPhily	MicroD-01

CONFIRMATION NO. 4100

FORMALITIES LETTER



OC00000006113731

Law Office of David McEwing
4582 Kingwood Drive No. 118
Kingwood, TX 77345

Date Mailed: 05/24/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 65.**

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);
 - Drawings must be in dark ink (not pencil), except where color drawings or photographs are permitted.

*A copy of this notice **MUST** be returned with the reply.*

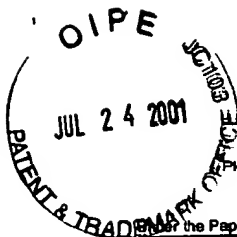
07/30/2001 AZERGHI1 00000082 09832304 65.00 0P
01 FC:205

A handwritten signature, possibly reading 'JR', is written in black ink above a horizontal line.

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



#3

Please type a plus sign (+) inside this box → ☒Approved for use through 10/31/2002. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/823,204
	Filing Date	April 10, 2001
	First Named Inventor	Michele R. DuPhily
	Group Art Unit	2161
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	MicroD-01

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Declaration of Inventor	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David McEwing
Signature	
Date	July 24, 2001

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <input type="text"/>		
Typed or printed name		
Signature		Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

O I P E

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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT(\$) **65.00****Complete If Known**

Application Number	09/823,204
Filing Date	April 10, 2001
First Named Inventor	Michele R. DuPhilly
Examiner Name	2161
Group Art Unit	2161
Attorney Docket No.	MicroD-01

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.18 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ **Payment Enclosed:**

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description	Fee Paid
101	201	355	Utility filing fee	
106	206	160	Design filing fee	
107	207	245	Plant filing fee	
108	208	355	Reissue filing fee	
114	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Code	Small Entity Code	Fee (\$)	Fee Description
103	203	9	Claims in excess of 20
102	202	40	Independent claims in excess of 3
104	204	135	Multiple dependent claim, if not paid
109	209	40	** Reissue independent claims over original patent
110	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	65	Surcharge - late filing fee or oath	65.00
127	227	25	Surcharge - late provisional filing fee or cover sheet	
139	239	130	Non-English specification	
147	247	2,520	For filing a request for ex parte reexamination	
112	212	920*	Requesting publication of SIR prior to Examiner action	
113	213	1,840*	Requesting publication of SIR after Examiner action	
115	215	55	Extension for reply within first month	
116	216	195	Extension for reply within second month	
117	217	445	Extension for reply within third month	
118	218	695	Extension for reply within fourth month	
128	228	945	Extension for reply within fifth month	
119	219	155	Notice of Appeal	
120	220	155	Filing a brief in support of an appeal	
121	221	135	Request for oral hearing	
138	238	1,510	Petition to institute a public use proceeding	
140	240	55	Petition to revive - unavoidable	
141	241	620	Petition to revive - unintentional	
142	242	620	Utility issue fee (or reissue)	
143	243	220	Design issue fee	
144	244	300	Plant issue fee	
122	222	130	Petitions to the Commissioner	
123	223	50	Processing fee under 37 CFR 1.17(q)	
126	226	180	Submission of Information Disclosure Stmt	
581	281	40	Recording each patent assignment per property (times number of properties)	
146	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
179	279	355	Request for Continued Examination (RCE)	
169	269	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **65.00****SUBMITTED BY**

Name (Print/Type)

David McEwing

Registration No.
(Attorney/Agent)

37,026

Complete (if applicable)

Telephone

(281) 360-4989

Signature

[Signature]

Date

July 24, 2001

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